

MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION DIVISION OF ADMINSTRATIVE AND FINANCIAL SERVICES SCHOOL FOOD SERVICES SECTION

ON-SITE SCHOOL REVIEW FOR SEAMLESS SUMMER OPTION SITES

Directions: This form must be completed during the fir	st 3 weeks of operation	n and	kept fil	led on site.	
Local Education Agency:					
Opening Date:	Closing Date:				
School Name:	Date Form Complete	ed:			_
 Meal service and Meal Counting 	rate count of ved? equal access to ement counted for reimbursement applicable?	ed:	NO	NA	
If answered "NO" to any question, corrective action and	prompt follow-up is i	require	ed.		_
CORRECTIVE ACTION PLAN:					
Site Supervisor's Signature Title		Γ	Date		
Monitor's Signature Title		Γ	Date		

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. Inquiries related to Department programs may be directed to the Jefferson State Office Building, Title IX Coordinator, 5th Floor, 205 Jefferson Street, Jefferson City, MO 65102-0480; telephone number 573-751-4581.